

Stellingen behorende bij het proefschrift:

CLINICAL USE OF CARDIAC CT

1. The use of a CT calcium scan to exclude coronary artery disease in patients with suspected stable angina and a low to intermediate probability, is safe and lowers diagnostic expenses and radiation exposure. *(this thesis)*
2. In patients with suspected stable coronary artery disease, a tiered cardiac CT protocol including CT calcium scan, selective CT angiography and dynamic CT myocardial perfusion imaging is associated with less negative invasive angiograms, less downstream testing and a faster diagnosis compared to functional testing. *(this thesis)*
3. Given the uncertain diagnostic accuracy of functional tests in women, direct visualization of coronary artery disease using cardiac CT may be particularly effective in women. *(this thesis)*
4. The image quality of coronary CT angiography outside the regular office hours in patients with suspected acute coronary syndrome, is sufficient for clinical care, but slightly lower than during office hours. *(this thesis)*
5. In patients with stable angina with a low coronary artery disease prevalence the challenge is to accurately rule out coronary artery disease in the majority without disease using relative simple means, while carefully assessing those who might benefit from revascularization. *(this thesis)*
6. In the end, as always, it is about finding the right test for the right person at the right time. *(Achenbach, Circulation, 2015;131:410-417)*
7. If only 38% of patients without known heart disease who underwent elective invasive angiography had obstructive coronary artery disease, current strategies that are used to inform decisions regarding invasive angiography, including clinical assessment of risk and noninvasive testing, need to be improved substantially to increase the diagnostic yield of cardiac catheterization in routine clinical practice. *(Patel, N Eng J Med 2010;362:886-895)*
8. PCI en CABG should be considered a valuable adjunct rather than an alternative to medical therapy in patients with stable angina. *(Simoons, Eur Heart J 2010;31:530-541)*
9. Use of radiation principles such as image gently, image wisely and as low as reasonably achievable (ALARA) must still remain the cornerstone of good practice. *(Chandrashekar et al, JACC Cardiovascular Imaging 2015;885-7)*
10. The concept of obtaining combined anatomic and functional imaging of the coronary circulation and myocardial perfusion in a single session is particularly appealing. Such “one-stop shop” approach has the potential to become the central decision-making element in the future diagnostic and therapeutic strategy for patients with coronary artery disease. *(Wijns, JACC Cardiovascular Imaging 2012;11:1112-1114)*
11. The pessimist sees difficulty in every opportunity. The optimist sees the opportunity in every difficulty. *(W. Churchill)*